Please type a plus sign (+) inside this box ^ [+]

PTO/SB/05 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	TI-35302
First Inventor	Raguram Damodaran, t al.
Title	Process Parameter Based I/O Timing Programmability Using Electrical Fuse Elements
Express Mail Label No.	EV334467767

22070 U.S.PTO 10/679724 100603

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. [X] Fee Transmittal Form (e.g., PTO/SB/17) *(Submit an original, and a duplicate for fee processing)*
2. [ ] Applicant claims small entity status. See 37 CFR 1.27.
3. [X] Specification *(preferred arrangement set forth below)* [*Total Pages* 24]
   - Descriptive title of the Invention
   - Cross Reference to Related Applications
   - Statement Regarding Fed sponsored R & D
   - Reference to sequence listing, a table, or a computer program listing appendix
   - Background of the Invention
   - Brief Summary of the Invention
   - Brief Description of the Drawings *(if filed)*
   - Detailed Description
   - Claim(s)
   - Abstract of the Disclosure
4. [X] Drawing(s) *(35 U.S.C. 113)* *Formal* [*Total Sheets* 7]
5. Oath or Declaration [*Total Pages* 2]
   a. [X] Newly Executed (original or copy)
   b. [ ] Copy from a prior application (37 CFR 1.63(d)) *(for continuation/divisional with Box 18 completed)*
      i. [ ] DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. [ ] Application Data Sheet. See 37 CFR 1.76
7. [ ] CD-ROM or CD-R in duplicate, large table or Computer Program *(Appendix)*
8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
   a. [ ] Computer Readable Form (CRF)
   b. Specification Sequence Listing on:
      i. [ ] CD-ROM or CD-R (2 copies); or
      ii. [ ] paper
   c. [ ] Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. [X] Assignment Papers (cover sheet & documents(s))
10. [ ] 37 CFR 3.73(b) Statement *(when there is an assignee)* [ ] Power of Attorney
11. [ ] English Translation Document *(if applicable)*
12. [ ] Information Disclosure Statement (IDS)/PTO-1449 [ ] Copies of IDS Citations
13. [ ] Preliminary Amendment
14. [X] Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
15. [ ] Certified Copy of Priority Document(s) *(if foreign priority is claimed)*
16. [ ] Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. [ ] Other:

18. If a CONTINUING APPLICATION, *check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:*

[ ] Continuation [ ] Divisional [ ] Continuation-in-part (CIP) of prior application No: _____/_____

Prior application information: *Examiner* _____ *Group / Art Unit:* _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

[X] *Customer Number or Bar Code Label* 23494 *(Insert Customer No. or Attach bar code label here)* *or* [ ] *Correspondence address below*

NAME	Robert D. Marshall, Jr.				
ADDRESS					
CITY		*STATE*		*ZIP CODE*	
COUNTRY		*TELEPHONE*	(972) 917-5290	*FAX*	(972)-917-4418

Name (Print/Type)	Robert D. Marshall, Jr.	*Registration No. (Attorney/Agent)*	28,527
Signature	Robert D. Marshall, Jr.	*Date*	October 6, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Express Mailing Label No.: **EV334467767**

TOTAL AMOUNT OF PAYMENT	($) 856.00

Complete If Known	
Application Number	
Filing Date	October 6, 2003
First Named Inventor	Raguram Damodaran, et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	TI-35302

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: **20-0668**

Deposit Account Name: **Texas Instruments Incorporated**

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ **Payment Enclosed:**

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
1001	770	201	355	Utility filing fee	$770
1002	330	206	160	Design filing fee	
1003	520	207	245	Plant filing fee	
1004	750	208	355	Reissue filing fee	
1005	160	214	75	Provisional filing fee	
				SUBTOTAL (1)	($)770

2. EXTRA CLAIM FEES

	Extra Claims		Fee from below			=	Fee Paid
Total Claims	20	-20**=	0	X	18	=	0
Independent Claims	4	-3** =	1	X	86	=	86
Multiple Dependent					270	=	

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description
1202	18	203	9	Claims in excess of 20
1201	84	202	40	Independent claims in excess of 3
1203	280	204	135	Multiple dependent claim, if not paid
1204	84	209	40	**Reissue independent claims over original patent
1205	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) ($) 86

**or number previously paid, if greater; For Reissue, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
1051	130	205	65	Surcharge - late filing fee of oath	
1052	50	227	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	139	130	Non-English specification	
1812	2,520	147	2,520	For filing a request for *ex parte* reexamination	
1804	920*	112	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
1251	110	215	55	Extension for reply within first month	
1252	410	216	195	Extension for reply within second month	
1253	930	217	445	Extension for reply within third month	
1254	1,450	218	695	Extension for reply within fourth month	
1255	1,970	228	945	Extension for reply within fifth month	
1401	320	219	155	Notice of Appeal	
1402	320	220	155	Filing a brief in support of an appeal	
1403	280	221	135	Request for oral hearing	
1451	1,510	138	1,510	Petition to institute a public use proceeding	
1452	110	240	55	Petition to revive - unavoidable	
1453	1,300	241	620	Petition to revive - unintentional	
1501	1,300	242	620	Utility issue fee (or reissue)	
1502	470	243	220	Design issue fee	
1503	630	244	300	Plant issue fee	
1460	130	122	130	Petitions to the Commissioner	
1807	50	123	130	Petitions related to Prov'l Apps (Proc. Fee under 37 CFR 1.17(q))	
1806	180	126	180	Submission of information Disclosure Stmt	
8021	40	581	40	Recording each patent assignment per property (times no. of properties)	
1809	750	246	355	Filing a submission after final rejection (37 CFR §1.129(a))	
1810	750	249	355	For each additional invention to be examined (37 CFR §1.129(b))	
1801	750	279	355	Request for Continued Examination (RCE)	
1802	900	169	900	Request for expedited examination of a design application	
Other fee (specify)					

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) ($)

SUBMITTED BY				Complete *(if applicable)*	
Name (Print/Type)	Robert D. Marshall, Jr.	*Registration No. (Attorney/Agent)*	28,527	*Telephone*	(972) 917-5290
Signature	Robert D. Marshall, Jr.			*Date*	October 6, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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